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I.

NEW MODE OF TREATING RUPTURES OF THE URETHRA.

From the Medico-Chirurg. Review.

M. DESRUELLES, surgeon to the Val de Grace, has published in the Journal des Progrés, No. XVIII., a kind of memoir on lacerations of the urethra. Several cases of rupture of this canal, and considerable hæmorrhage in consequence, are related. In one, there being inflammation of the urethra and retention of urine, the employment of the catheter gave rise to such formidable hæmorrhage that the patient was lost. In another the individual was nearly destroyed by bleeding, in consequence of the introduction of the caustic bougie. In a third case acute inflammation of the urethra was followed by rupture, infiltration of urine into the surrounding parts, and death. M. Desruelles remarks that horse exercise is one of the most frequent causes of this accident in persons laboring under chronic inflammation of the urethra, for he has almost always observed it in horsemen. As laceration of the urethra is generally combined with, or dependent on contraction of the canal, M. Desruelles conceives that it is a matter of importance to dilate the strictured part, without interfering with the remainder of the urethra. He has therefore employed a hollow silver tube, one or two inches in length, and of different diameters, which is introduced into the contracted part, and withdrawn by means of a silken thread attached to one of its extremities. Before its introduction, it is necessary to introduce a bougie, in order to learn the requisite size of the tube, and the depth to which it must be passed. The silken thread is then passed through what may be termed a conductor, the tube being thus attached to its extremity. The tube is then pushed before the conductor into the strictured part of the urethra, where it is left, while the conductor is withdrawn. The silken thread being fastened round the penis, or to proper tapes, prevents the tube from slipping farther into the urethra or becoming impacted there. The tube is left in for twenty-four or thirty-six hours. We cannot say we see any advantage in this complicated manœuvring. It is much more clumsy, and much more difficult, than the introduction of a silver catheter—more likely to create irritation, and not a whit more adapted to effect a cure. In the abscess of the perineum, depending on fistulous opening into the urethra and stricture, such a mode of proceeding would in most cases be impracticable ; for it is often impossible, always difficult, to introduce the more manageable bougie. Besides, if any accident happened to the silk thread, or if severe inflammation of the urethra and surrounding cellular membrane supervened, it would be but an awkward thing, at the best, to have a little tube pent up in the inmost recesses of the urethra. However, our readers may form their own opinions on the subject.

II.

POISONING BY OPIUM AND BELLADONNA, USED AS AN INJECTION.

MADAME * * * *, æt. 22, had been tormented for some months by a dartrous eruption on the vulva. Having tried various means without relief, she applied a strong solution of opium and belladonna, which gave her some ease. On the 19th of November, 1829, she determined to use the narcotics in the form of enemata, and mixed a pint of the lotion with sufficient water to make three injections, each containing a scruple of opium and half an ounce of the leaves of belladonna. She took the first at eight o'clock in the evening, and the second and third shortly after the first; all three were returned, and some feces were discharged. At half-past eight she went to bed, feeling rather confused. Her husband, a medical man, found her sleeping soundly at half-past nine, and did not disturb her. At midnight, however, finding her still buried in the deepest slumber, he became alarmed and sent for Dr. Solon. Her face was now extremely pale, the pupils dilated to the utmost, the tongue dry, deglutition difficult, the respirations short and frequent, the pulse small and 130. The limbs were perfectly motionless, and the skin insensible to pinching or irritation of any kind. A purgative injection was immediately exhibited, a free bleeding practised from the arm, ten leeches placed behind each ear, sinapisms applied to the thighs and legs, and ether draughts administered by the mouth. At five o'clock next morning the patient opened her eyes, uttered a few unconnected words, and vomited some bilious matters. In the course of an hour she awoke, as from a painful dream, recollecting nothing of what had occurred. Vision was imperfect; she appeared to see things through a thick veil, and whenever she closed her eyes her ideas became confused and incoherent. We need not pursue the details; suffice it to say that the lady recovered from all her severe symptoms. The parts, however, to which the sinapisms had been applied, sloughed, in consequence of the length of time they had been continued, and many months elapsed before she could walk about. The eruption on the vulva was quite cured by this severe discipline, and the patient subsequently went well through a confinement.—*Ib.*

III.

APPLICATION OF THE CUPPING-GLASS TO THE EMPTYING OF ABSCESSES, OR OTHER CAVITIES.

THE cupping-glass may be very usefully employed to the above purposes. Our readers are aware that many methods of evacuating large abscesses have been recommended by eminent surgeons. Mr. Abernethy makes a small puncture, carefully squeezes out the pus, and uses every precaution to close the opening. Mr. Brodie is rather disposed to make a larger puncture, and, without any squeezing or kneading whatever, to allow the matter to drain into a fomentation-cloth, taking care to keep the patient in a state of perfect rest. Where many and opposite measures are adopted by men of talent and observation, the result of none is uniformly successful; and we have seen bad consequences ensue after both the methods to which we have alluded. The fact is this: in many cases of psoas or other abscess, the cellular membrane is very extensively destroyed, the muscles perhaps are eaten away, the bones carious, the constitution bad. Now when such is the mischief, bad consequences *must* follow any plan we can devise, or occur if no operation is attempted; the patient being rather destroyed by the disease than by any operative injury inflicted. But still there are milder cases in which the issue is not necessarily fatal, and in which the judicious evacuation of the abscess will effect a cure. It is certain that if such abscesses be opened in an improper and unskilful manner, if there be much squeezing and kneading and probing, the parietes of the cyst inflame, its contents become putrid, sulphuretted hydrogen gas is locked up, and a train of the most characteristic typhoid symptoms are the consequence. Now we have seen Mr. Brodie employ the cupping-glass with much advantage in the emptying of such abscesses. The pressure made by the atmosphere is equable and regular, though strong, and there is less danger of air being admitted through the wound than in the ordinary mode of proceeding. The abscess being freely punctured with a lancet, Mr. Brodie immediately puts on a succession of glasses till the matter ceases, or nearly ceases, to escape. He then applies a poultice, and keeps the patient in a horizontal posture and in bed. About a month ago we saw a little girl with an abscess on the buttock, apparently communicating with the hip-joint, treated in this manner, and not an unfavorable symptom supervened. We do not pretend that bad consequences will never follow this, as they will any other operation in these cases; but they rarely do so, and the plan is in general unattended with inconvenience. The cupping-glass is equally applicable to the evacuation of other large cavities as to abscesses. Mr. Brodie, for instance, employed it in a case of hydatids on the convex surface of the liver, after puncturing the prominent tumor in the hypochondrium. Perhaps these hints may be of service; and we are sure Mr. Brodie will be pleased to see some of the results of his extensive experience and keen observation, made available and useful to his less fortunate brethren.—*Ib.*

IV.

CASE OF CONICAL CORNEA.

By JAMES M. STAUGHTON, M.D., late Professor of Surgery in the Medical Department of the Columbian College, now of Cincinnati.

From the Western Journ. of Med.

IN the summer of 1828, a young woman, of 19 years of age, called at my office in Washington city for advice. By the manner in which she groped her way into the room, I perceived that she was nearly blind. She was from the country, but was then on a visit to her sister at the Navy Yard. She complained of a dimness of vision in both eyes, which had been gradually increasing for two years. On looking at her eyes, which at first glance appeared natural, I recognised a case of conical cornea. I was in a moment struck with the truth of Travers' beautiful description of the disease, which he tells us causes the cornea "to exhibit a degree of tenuity and brilliancy which gives it the appearance of a pellucid fluid, like a dew drop suspended."

The alteration in the shape of the cornea was great, and consequently the vision very imperfect. The patient could tell on which side of the room the windows were situated, but so refracted were the rays of light, that she could distinguish neither their form nor number. She was unable to walk alone in the streets, and it was by her sister's arm and guidance that she reached my office. Nor was her sight much more distinct when the axis of vision was shortened. The most close approximation of the object to the eye, assisted her vision but little. I had in my possession a lens of unusual concavity, made for an optical instrument; this, however, she found to be of no assistance, as indeed usually happens.*

She complained of a continual sensation of fulness in the eyeballs, amounting at times to great pain. There was not, so far as the most attentive scrutiny could detect, the slightest vestige of inflammation in any of the tissues of the eye.

This was the first case of conical cornea that had ever presented itself to my observation. From the various authors that had touched on the subject, I understood it to be an absorption of the interlamellar texture of the cornea, by which it loses its natural tonic resistance to the contents of the globe. I was forcibly struck with the great extension that the cornea had undergone; for the cavity of the aqueous humor was capable of containing more than double the usual quantity of fluid.

I am not disposed to deny the power of this interlamellar absorption to produce disease—though I believe we have no post-mortem examinations to prove it. On the contrary, I think it would be difficult to account for the conoidal figure assumed, without supposing that the cornea afforded less resistance at the centre than at the edges. It appeared to me easy to account for the symptoms which were presented, by supposing the vessels which supply the aqueous humor to be in a state of increased activity. The gradual manner in which the various tissues extend before a slowly accumulating secretion, leaves no difficulty in accounting for the change of shape which occurs. Of the extensibility of the cornea, Burgman gives a frightful instance in a man who was hanged, whose corneæ were so prodigiously distended that they reached down to the mouth like horns. — *Haller. Disputat. Chirurg.*, *Vol.* II.

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* The most extreme cases of near-sightedness resemble the disease in question, in the projection, though not in the conoidal shape of the cornea, and many of the most prominent symptoms are very similar. A remarkable case of this kind occurred in a Baptist Clergyman, now no more, well known for his eccentricities, and much respected for his unaffected piety and benevolence, a resident of New Jersey. He was so near-sighted as to be unable to walk without guidance. He could not read without approaching the book within an inch of his eye, and even then could not see a letter unless he were in the open air, and the sun shining strongly on the page. Notwithstanding these difficulties, he mastered the languages. In the Greek he was truly learned, and being a man of great natural shrewdness, some of his philological researches were deemed truly valuable. His ingenious friend, the late Rev. Dr. Allison, ground concave glasses for his use in reading; but so great was the requisite concavity, that the size of the letters was diminished so as to be scarcely perceptible.

Of course, if lenses are used in the disease before us, they must be ground into a hollow conoidal shape, and not concave.

That a continued pressure was kept up in the eyes, the painful sensations of the patient most abundantly proved. If the alteration in the shape were to be attributed to the pressure of the contents of the globe on the attenuated cornea, then ought all those contents, in a case of great extension like the present, to be carried greatly forward — then ought the iris to present a convexity on its anterior surface — then ought the cornea to be soft and yielding to the touch. Now, in the case before us, I could find no convexity of the iris; and when the cornea was felt beneath the lid, which it caused to project very much, I found it firm and resisting. From this view of the subject, I came to the conclusion that the disease was owing to an increased accumulation of the aqueous humor; and I determined to try if I could not reduce its quantity by some of the means within our reach. How far this view was correct, the result of the case will prove.

One word more. Mr. Wardrop remarks, that in those cases which he had examined, there has always been a small portion of the cornea, where the surface was irregular, having the appearance which is observed where a thin membrane fills up a part of the cornea which has been previously destroyed by ulceration. Hence he concludes that conical cornea is always the result of a structural or organic change. In one case of Mr. W.'s, there was perceived by the patient a multiplication of images; and there must have been inequalities on the surface of the cornea, not, perhaps, unlike the various facets which the lapidary gives to the crystal, but of much greater irregularity. This case his friend, the celebrated Dr. Brewster, of Edinburgh, examined with great attention. The Doctor was led to the conclusion, from this and several other similar cases, that an irregularity of the corneal surface must be present in all possible cases of conical cornea; and he proposed to relieve it by glasses ground so as to correct the irregular refraction.

Far be it from me to suppose that the irregular surface does not at times accompany conical cornea, — though I must be excused from believing that Dr. Brewster, or any other optician, could grind glasses to suit the varieties of irregularly refracting corneæ. This opinion, however, I think explains very satisfactorily the manner in which what Mr. Travers calls "*the tubular spectacle frame with a pupillar aperture*" renders the vision of the patient, in certain cases, more distinct than any other contrivance; for then the rays of light can be made to fall on a small portion of the smooth and uninjured cornea, and thus undergo a regular though excessive refraction, while the rays are broken up and dispersed when they fall on the uneven surface of the whole cornea.

Mine, however, was not a case of this kind. The most minute examination after Dr. Brewster's most approved method, did not show any irregularity on the surface of the cornea. Nor did a pin-hole in a card—which might perhaps answer as well as the "*tubular spectacle frame, &c.*,"—render the vision one whit more distinct.

The known properties of the iodine in promoting absorption, presented themselves to my mind as offering the best means to diminish gradually the quantity of the aqueous humor, and to produce a corresponding alteration in the shape of the cornea. I directed the patient to rub the surface of the lids with a small portion of the ointment of iodine every night and morning.

The first application of the ointment generally vesicates. It did so in this case. My patient, however, courageously continued its employment, and in four days she had so far recovered her sight as to be able to walk alone from the Navy Yard to my dwelling, a distance of upwards of two miles. The convexity of the cornea I found much diminished, and its transparency in no way injured. She was in the highest spirits at so wonderful an improvement, and continued to attend with the greatest diligence to my directions. In less than three weeks, she was able to read and to sew, from which she had been debarred for many months. She was anxious to return to the country. I directed her to continue in the moderate use of the iodine.

From that period I never heard of her till April, 1830, when she came into the city to procure another box of the ointment. Her vision had remained distinct, and for upwards of a year she had not used the iodine. She had lately taken a severe cold, and feared her old disease was returning. I detained her in the city till she had used a portion of the iodine, and till she was perfectly satisfied that the disease was absolutely under the control of the remedy.

Conical cornea is a rare disease. Many surgeons of great practice have never seen a case. I know of no remedy that has been so successfully used in the disease, as the iodine in the case related. Should a more extended trial prove its efficacy, I shall feel great pleasure in having thus communicated it to my professional brethren.

V.

NOTICE OF IRON FOUND IN THE POWDER OF CINCHONA BARK. BY CHARLES ELLIS.

From the Phil. Journ. of Pharmacy.

A CIRCUMSTANCE occurred with a highly respectable house in Baltimore, to which we are indebted for a knowledge of an accidental impurity in the powder of cinchona, which is believed to be of sufficient importance to interest the readers of the Journal.

An ounce of calisaya bark *in powder* was procured of them, and directed by the physician to be made into a decoction. The liquid when decanted was nearly the color of ink. A second ounce was obtained and infused in an earthen vessel, with precisely the same result. The conclusion was, either that the bark or the water contained iron; and to determine to which of these causes to assign this change of color, and to ascertain whether the bark were really impure, these gentlemen submitted it to the following experiments, viz:—1. A small quantity of the powdered bark was examined by the aid of a microscope, and the whole surface found studded with small metallic specks, some black, some bright, giving it quite a lustre. 2. A quantity of the powder was boiled in a Florence flask with distilled water. The decoction was of a deep black color, taste similar to ink and entirely devoid of the sensible properties of a decoction of pure cinchona; suffered to stand, the supernatant liquor was of a greyish blue color, and the precipitate of a dark brown, approaching to black. 3. A quantity of the powder was exposed, in a shallow vessel, to a stream of water, so as to wash away the lighter particles, and the deposit left in the bottom of the vessel consisted of small black grains of a metallic lustre. The inferences drawn from these experiments were, that the powder contained a metallic substance which proved to be iron; and that the precipitate in the decoction was owing to the action of the components of cinchona upon the iron.

These results led to an examination of other parcels of powdered bark, and in upwards of twenty different samples examined by my friend John Farr, and a number by myself, there were none in which the magnet did not detect minute particles of iron; in some much fewer than in others.

In order to ascertain the amount of impurity in a given quantity of bark, I washed carefully half an ounce of the same lot used in Baltimore, and obtained one grain of iron in a metallic state: there was perhaps from a fourth to half a grain lost in the operation. From one ounce of another parcel there was half a grain separated by the magnet.

It will be readily perceived, from the nature of this admixture, that it was entirely accidental, and fortunately not of a character calculated to do any injury.

Inquiry having been made of the powderer, it was ascertained that his machinery does not materially differ from that in general use; that the revolving stone is shod with iron, and passes over a cast-iron plate—a sufficient cause for the existence of minute particles of iron in the powder, particularly as in this instance the bark was not dusted, a process by which the impalpable powder is separated from the heavier and coarser particles.

Although it is not probable that the quantity of iron found in this cinchona would render it objectionable in many cases, still it is desirable at all times to have our remedies free from all foreign admixture — that the physician may know precisely what he is directing, and the patients may neither be alarmed nor disgusted with unexpected, and to them unaccountable dangers. From the well-known hardness of the French burr stones, we may readily conclude that bark might be ground by them without the fear of adulteration.

It may be observed, in passing, that barks, roots, &c., of nearly every kind, are more eligible for decoction or infusion when coarsely powdered, or bruised, as it is technically called, than when reduced to an impalpable powder.

VI.

ON AROMATIC OR SPICED SYRUP OF RHUBARB. BY ELIAS DURAND.

DR. COXE, in the last edition (1830) of his American Dispensatory, has very judiciously observed that this syrup, prepared agreeably to the Pharmacopœia of the United States, possesses a defect which may be easily obviated, without changing the proportions of its ingredients. In fact, evaporating to one half an infusion of rhubarb and aromatic substances, is quite inconsistent with the present improvements in pharmaceutical manipulation ; it is too well known that these articles lose, by ebullition, a great portion of their active properties.

This fault, as well as many others which have crept into that national work, has not escaped the attention of our practical pharmaceutists. From the first time I had to compound the aromatic syrup of rhubarb, this defect struck me, and I amended the formula by the following, which undoubtedly affords a preparation very superior to the other, both in nicety and activity. I first prepare an alcoholic tincture with the rhubarb and the aromatic ingredients, and then form my syrup by the addition of a relative quantity of simple syrup.

Aromatic Tincture of Rhubarb.

R. Rhubarb of good quality, parts v.
Cloves and cinnamon, of each, parts iv.
Nutmegs, part i.
Alcohol of 20 deg., parts lxiv.

Bruise the ingredients and macerate them for about a week.

Aromatic Syrup of Rhubarb.

R. Aromatic tincture of rhubarb, part i.
Simple syrup of 35 deg., parts iii.

Mix well. This syrup marks 28 deg. on Baume's pèse syrup.—*Ib.*

VII.

WHETHER ANIMAL DECOMPOSITION IS PRODUCTIVE OF FEVER?

To the Editor of the Boston Med. and Surg. Journal.

SIR, — A correspondent has, in your Journal, noticed my Essay on Animal Malaria, in a manner that entitles him to my thanks, notwithstanding the opposition he frankly avows to my opinions. As my only wish is to arrive at the truth upon an important question, I am bound to feel as grateful for evidence that tends to refute my opinions, as for that which supports them, especially when offered in such a candid and agreeable manner.

Of the seventeen instances I have adduced of fever caused by animal decomposition, he examines only one. I have stated it thus :—" Dr. Rand, in his history of the yellow fever in Boston, relates the case of a person who was employed to remove some hides in a very putrid state, upon a point of land opposite Wheeler's wharf, and who sickened and died on the third day. This history of Dr. Rand describes the masses of animal matter in a putrid state on Forthill, Stoddard's wharf, &c., and the cases of the fever that originated from them. Three lads, apprentices to Mr. Marston the cooper, by repacking some of this beef, were seized with the fever and died. Now had the same number of persons been employed in moving the coffee on the wharf in Philadelphia, and all shared the same fate, is it likely that such a difference of opinion would have existed respecting the origin of the fever that prevailed in that city in 1793 ?"

To this it is replied, by your correspondent, that fever has appeared in the district of Forthill three times since the above of 1798, and he thinks it probable that there is some fixed local cause, which is eliminated in hot seasons upon this spot, such as malaria from the soil ; that in one house three persons were attacked on the same day, and died on the fifth, and no animal putrefaction of flesh or fish could be discovered round the house.—Now the question at issue is not whether animal decomposition be the only cause, but whether it ever is a cause of fever. Three lads were employed in repacking putrid beef, and they all became victims of the yellow fever. Does it appear that any other company of persons employed together at the time in other business, all shared the same fate ? If not, it is fair to conclude, if no other cause is assignable, that the putrid beef had some agency in causing the fever. Your correspondent admits that it had, but thinks it only acted as an exciting cause, and "that the predisposing cause was from some other source, and that this determined the disease to be what it was ; that in another year, when a milder epidemic was prevalent, that same exciting cause would have produced that milder disease." But if he will compare this case of the boys with some others adduced in my Essay, he will find that animal putrefaction caused fever in persons and communities where no epidemic prevailed, and that they were attacked immediately on their exposure; and he will find, too, that it is the putrid or the yellow fever only that is producible by such putrefaction, which shows that its operation is not controlled nor varied by any predisposing cause.

He adduces one piece of evidence only which has not been considered, if not refuted, in my Essay ; it is that of slaughter houses, which he maintains to be not only innoxious, but even conducive to health. But here he has not shown specifically that all the circumstances exist in them, that I have stated as necessary in order to eliminate the cause of fever from decomposing animal matter, and which himself believes to be necessary to render vegetable decomposition a cause of yellow fever. These circumstances are, heat, for a succession of days above 80 deg., moisture, abundance of materials, in such masses as will produce an intestine fermentation ; and I ought to have added a quiescent state of them, for this seems deducible from the cases recorded in my Essay. Now the facts in respect to animal matter in slaughter houses, so far as my observation has extended, are these :—The offals are thrown into a pen among swine, who are incessantly at work, during the day, in turning over the mass, and devouring all the animal substances as fast as they collect. If any portion of flesh is unconsumed, which I very much doubt, it is kept in constant motion ; thus differing essentially from the heaps of putrid fish, oysters, or an entire carcass, which I have stated caused fever, and also from the heaps of coffee, potatoes, cabbages, &c., which your correspondent will admit has produced yellow fever. In all these cases, there is an intestine fermentation in the centre of the mass, and an evolution of the febrific cause. It is true the heads of cattle are thrown round slaughter houses in the open air, having minute portions of flesh adhering to them ; and these, though not in sufficient masses to produce the intestine fermentation just mentioned, are enough to produce all the putrid stench for which slaughter houses are distinguished.

That butchers enjoy good health, is an opinion entertained by other highly distinguished medical gentlemen of candid minds ; but probably this is less owing to any sanative or salubrious qualities in the air they respire, than to the active and regular, yet not exhausting nor exposing, nature of their employment, and to the abundance of wholesome animal food they always have at hand.

Let your correspondent adduce what he has not done, an instance of animal decomposition that proved harmless, and which combined all the circumstances I have stated, the existence of which he admits to be necessary for the production of yellow fever from decomposing vegetables, and I will then admit it as evidence of—what ? not of its being non-febrific under any circumstances, because no one can presume to say he knows *all* the circumstances that could influence its operation as a cause of fever ; but I would admit that it did not produce fever in that case, although it did produce it in a great number of cases recorded in my Essay. I would then, in return, point to the marshes and streamlets in the neighborhood of the slaughter houses he alludes to,—to the swamps and marshes of New England,—to every collection of decaying vegetables around farm-houses,—and ask him, if decomposing vegetables cause yellow fever, as he admits, why do not each of these produce it annually? and I am not sure that he could, in all cases, give a more satisfactory answer or explanation than the above respecting animal malaria. Yours, &c.

USHER PARSONS.

Providence, Nov. 30, 1830.

VIII.

NEW WORK ON THE SURGICAL ANATOMY OF THE ARTERIES.

IT affords us pleasure to give publicity to the following note from a gentleman whose opinions are at all times entitled to the highest respect of the faculty.

To the Editor of the Boston Med. and Surg. Journal.

SIR,—I received, a few weeks since, the 1st No. of Surgical Anatomy of the Arteries, by Nathan R. Smith, of Baltimore, Professor of Surgery in the University of Maryland, and one of the Surgeons of the Baltimore Infirmary. The work is to be completed in six numbers. From a hasty glance at the work, I am favorably impressed with its merit. It seems an original work drawn from nature. The arteries of the head and neck are exhibited in their just proportions, accompanied by a delineation of neighboring parts. His descriptions are lucid. His pathology of the diseases of the arteries is intelligible ; their history is formed from original observation, and the treatment recommended bears the stamp of actual experience. The only similar work with which I have compared it, is that of Charles Bell (Am. Edition); and Smith's Surgical Anatomy of the Arteries, as far as pursued, is much more full, and altogether a safer guide to the operative surgeon. To the medical student the work recommends itself as an important addition to the facility of acquiring accurate anatomical and surgical knowledge, while the experienced practitioner will receive it into favor as facilitating the retention of what he fain would never forget. It is very possible some of your readers may extend to the work a candor, from associating with the author a name dear to New England, — particularly when they perceive, in the production of the son, the originality, the racy genius and untiring labor, characteristic of the father; and at the same time know that it is the filial piety of the son which is the only earthly resource of a numerous—now *fatherless*—household.

By inserting the above in your Journal, you will oblige, my dear Sir, A SUBSCRIBER.

BOSTON, TUESDAY, DECEMBER 6, 1830.

NEW WORK ON THE PHYSICAL SIGNS OF THORACIC DISEASE.

THE use of the Stethoscope in the investigation of diseases of the chest, is daily becoming more common in New England, and in more southern portions of the Union is understood to be familiar to every respectable practitioner. How much this mode of research is to be credited, will depend in a great measure on the accuracy with which the instrument is constructed, the power of the physician in the distinction of sounds, and his knowledge of the relation which, experience has taught us, subsists between peculiar descriptions of sound and certain conditions of disease. Auscultation, then, is not a process to be undertaken by every practitioner, or to be attempted by any one at the present day without a previous knowledge of its phenomena, as set forth by those who have devoted to it their time, attention, and experience. But when applied by a skilful hand, with a practised or a discerning ear, and a knowledge of the circumstances before alluded to, it is unquestionably a great aid to the other means possessed by the faculty, by which the existence and extent of the diseases of the organs connected with respiration, are ascertained.

It is to be feared that many have abandoned the use of the stethoscope, after a very limited trial of it, whose want of success with it has been owing to deficient information on the points of which we have spoken. Nor is this altogether their own fault. There has been a dearth of means for acquiring this knowledge, which has been extensively felt, and it is therefore with pleasure we notice the republication, at Philadelphia, of Dr. Williams' valuable work on this subject. Dr. Williams was a pupil of a distinguished auscultator, and enjoyed opportunities for study and observation in the wards of La Charité, where Laennec first taught the use of the stethoscope, and the celebrated Andral prosecuted his studies. These circumstances give us a confidence in his opinions and statements, and impart additional interest to his work, which we recommend to the attentive perusal of every enterprising practitioner.

The Philadelphia edition makes a neat volume of 200 pages. It contains a plate of the *regions*, which should be known for purposes of reference and correspondence, and a very accurate representation of the construction of the different parts of the most approved stethoscope,—from which an artist of ordinary ingenuity may form one without difficulty.

THE WEATHER.

It cannot be wondered at that inflammatory diseases of the internal organs should be unusually rife at the present moment. We do not remember ever to have known so protracted a succession of sunless days. During the whole of November, on but three or four days only has the sun been visible. Winds from the North East, cold, chill, damp and penetrating, have blown almost uninterruptedly. The known effects of these winds on persons suffering under diseased or debilitated lungs, have been heightened by their long continuance. A large proportion of the people are complaining of coughs and sore throats, lung fevers are severe, and we doubt not the seeds of pulmonary consumption have been planted with more than ordinary profusion.

Besides this, a general tendency to inflammation has been induced by the protracted impression of a damp cold atmosphere on the surface—so unfavorable to healthy transpiration—and more than ordinary caution will be required to escape the evil consequences of so gloomy a month at the onset of winter.

FORMULA.

In foreign pharmacopœiæ and other works of pharmacy, we often find formulæ for combinations, that are entirely unknown to those of our own country. We insert the following from Verey's Pharmacy, without any respect to arrangement.

Silk Plaster Cloth.

R. Isinglass 1 oz. 1 dr.
a Alcohol 22 deg. Baumé 12 oz.
Tincture of Benzoin or of Balsam of Peru 2 oz.
b Tincture of Benzoin 6 oz.
Fine liquid Turpentine 4 oz.

This kind of plaster is applied on white or black silk, stretched on a frame garnished with points. A solution of the isinglass is to be made in boiling water: to this is to be added the alcohol and tincture of benzoin, (*a*) mixed together hot and well filtered. Of this solution a thick coat is to be applied to the upper surface of the silk, by means of a brush or pencil. This coat being dried, five others are to be successively applied; afterwards two coats of the tincture of benzoin (*b*) and the turpentine. This last application increases its flexibility; and though some pharmacians prefer the tinct. bals. Peru, yet the latter scales off more readily, while it is more agreeable.

Dover's Powders.—The following formula for this ancient and celebrated powder is from the French Codex.

R. Sulphate of Potassa,
Nitrate of Potassa, each 4 grammes, or 61 76-100 troy grains.
Ipecacuanha in powder,
Opium purified,
Liquorice in powder, each 1 gramme, or 15 44-100 troy grains.

It is recommended, in the pharmacopœia of Swediaur, to melt the nitrate and sulphate of potash together in a crucible, and then unite them to the other powders. The dose is directed to be 12 grains.

Cough Lozenges of Tronchin.

R. Powdered Gum Arabic 8 oz.
Brown Hydrosulphuretted Oxide of Antimony,
Anise, each 4 scruples.
Extract of Liquorice 2 oz.
Gummy extract of Opium 12 grs.
White Sugar 2 lbs.

Mix and make into lozenges weighing 6 grains each. Of these, one may be taken occasionally in diseases of the throat and chest.

Lozenges of Oxalic Acid, for Thirst.

R. Pure powdered Oxalic Acid 2 dr.
Sugar 1 lb.
Volatile Oil of Lemons 20 or 30 drops.
Mucilage of Gum Tragacanth q. s.

These lozenges may be colored red by means of a little carmine, blue by Prussian blue, or yellow by turmeric, if desirable. They are very pleasant in fever. And if it be desirable merely to make an *oleo saccharum*, the mucilage need not be added, and the compounds can be preserved in the state of powder, and used to prepare *lemonade.*

Lozenges of Magnesia.

R. Calcined Magnesia 1 oz.
Powdered Sugar 4 oz.
Mucilage of Gum Tragacanth in orange-flower water q. s.

These lozenges are prepared as the preceding.—In the same manner may be formed lozenges of chalk, prepared oyster shells, &c.

Paste of Liquorice, Gum, &c.

R. Purified Extract of Liquorice 1 lb.
Gum Arabic 2 lbs.
White Sugar 1 lb.
Powdered Orris Root 1 dr.
Oil of Anise or other Volatile Oil 24 drops.

Dissolve the gum in warm water (q. s.), strain it, and add to the solution the sugar and the liquorice, and liquefy the whole on a sand bath. Then evaporate it to the consistence of a thick syrup, and mix the powder and essential oil with it. The paste is afterwards to be placed in metallic moulds, such as are used for chocolate, and exposed to a temperature of 40 or 50 deg. of C. in a stove, until it is sufficiently dried. It is then divided into little squares, and esteemed expectorant and demulcent.

Jujube Paste.

R. Jujubes, peeled and selected, 1 lb.
Sugar 5 lbs.
Gum Arabic 6 lbs.
Water 30 lbs.

The jujubes are to be pressed in order to open them, then boiled in the water, and afterwards passed through a cloth by expression. With this decoction and the sugar, a concentrated syrup is to be made, which it is best to clarify with the whites of half a dozen of eggs, and strain it when reduced to two-thirds. The gum arabic, clean and bruised, is to be dissolved in part of the water, strained, and thickened by evaporation, and then added to the syrup: the whole to be rendered aromatic with the alcoholic tincture of citrons dissolved in a little water. The syrup afterwards to be poured into moulds, and evaporated to the proper consistence in a stove at a heat of 30 deg. C. The mass obtained should be 9 lbs. If dried too much, it becomes as tenacious as horn.

Phil. Journ. of Pharmacy.

Effect of Light on Plants.—M. Leuchs. It is well known that solar light, by enabling plants to decompose and assimilate carbonic acid, gives them the power of forming volatile and aromatic principles, and of acquiring a green color. Its presence is so necessary to flowering and fructification, that ripe seeds have never been obtained in darkness; on the contrary, if an etiolated plant be exposed for three, four, or five hours to the sun, it immediately becomes of an equally intense green color with those which have continually grown in light. Plants raised in the open air, when put into darkness, become pale and fade in two or three days; those which, after being raised in darkness, have been exposed for a time to sunlight, cannot again support the privation of light, but die; and water charged with camphor, or essential oil, which has great power of invigorating plants, cannot prevent their destruction. The perfect absence of light is therefore very injurious to plants, and M. Leuchs concludes, that, without the light of the moon and stars, nights would destroy vegetables.

The light of a lamp can, although imperfectly, replace that of the sun; the plant becomes green and tends to the light. When seeds were germinated in three vessels, the first uncovered, the second covered with single, and the third with double paper, those of the first vessel exhibited less external development, but when dried, they gave more solid matter; those in the second were more developed, but were more aqueous and loose; the difference was still greater in the third vessel.

The texture of various plants appears to be more or less aqueous (if the word may be used), when deprived of light, according to the nature of the plants. When plants were placed in a damp cellar or cave, enlightened by a flame, those nearest the flame contained most solid matter; the results were so regular, as to present something like a law, relative to the action of various quantities of light on vegetables.

Light reflected by mirrors appeared to have a very beneficial influence upon plants, and M. Leuchs thinks that many hill sides are rendered fertile by the similar reverberation of light from the neighboring rocks. *Archiv von Castner.*

Method of drying Narcotic Plants for Powders.—Mr. Battley has prepared the following rules for drying narcotic plants for powders:—The same rules for reviving withered plants must be practised as recommended in the April number of our Journal, page 86. Then the leaves being in a state of high preservation, and entirely freed from the stalks and external moisture, must be laid in thin layers, in baskets made of peeled willow, placed in a drying room, from which the light is entirely excluded. The temperature of this room should be raised to between 130 and 140 deg. F., for three or four hours, or until the leaves begin to shrivel. They are then to be turned, and the same temperature preserved for six or eight hours longer, which will generally complete the process. This fact may be known by the leaves crumbling easily in the hand. When the process has been properly managed throughout, the leaves will be found to retain their green color in perfection, and consequently their medicinal properties. Oil jars made perfectly clean and dry are found to answer best for preserving them in this desirable condition. The leaves should be placed lightly in the jars; they should then be hermetically sealed, and kept in a dry and warm situation.

The rules suggested by Mr. Battley appear to us well worthy of the attention of our apothecaries. Narcotics are an important class of remedies; and as they are so modified by soil, climate, cultivation, &c., it should be an object with our apothecaries not to allow them at any rate to deteriorate, in the manipulations to which they subject them.—*Phil. Journ. of Pharmacy.*

Spiders.—Professor Weber, of Leipsic, states, that he watched a little spider as it was constructing its web between two trees. The three principal points to which it was attached, formed, as usual, an equilateral triangle. The two upper threads were fixed to the trunks of the trees; but not finding a point to fix the lower upon, the spider suspended from its extremity a little pebble, by way of counterpoise. The pebble being heavier than the animal, kept the web perfectly extended.—A curious paper was lately read at the Paris Academy of Sciences, on the construction of a spider's nest in earth. This spider is a native of Corsica. The nest is in the form of a well, two inches deep, and six lines in width. The interior is lined with fine web, and the top is furnished with a kind of lid, with hinges, which shuts when the insect is in. This lid, which is composed of earth and web, consists of upwards of forty layers.

Remarkable Case of Re-union of a divided Part.—A case of this description, which occurred at a Quebec hospital, is worth recording.—A man, in chopping wood, cut off the first phalanx of the middle finger. For two hours after the accident, he remained occupied at home. Although the divided part of his finger then appeared to be deprived of vitality, it was determined to follow the plan of Mr. Balfour, and to attempt to re-unite the parts. The tip of the finger was fixed to the stump by adhesive plaster, and in three days union had taken place in two or three parts, and the extremity of the finger which had been divided had as much sensation as any other part of the body. The dressing was continued, and in three more days the re-union was complete.

Translation of the Mecanique Celeste, by N. Bowditch.—We perceive in this translation, (says the Revue Encyclopedique,) an incontestable proof of the progress of mathematics in the United States, a country which we are accustomed to consider as sterile in the sciences which are purely speculative. If all the divisions of human knowledge are there cultivated with as much success as this, learning will flow back towards its origin, and the west will shed its light upon the east. As the second volume of this translation is to appear in the course of the present year, we shall reserve our account of both until it arrives, and this will impose upon us new mathematical studies, for the indefatigable translator has more than doubled the extent of the original by his notes and commentaries, which will be more particularly the objects of our attention.

Chorea.—M. Dupuytren is in the habit of treating chorea with the cold bath and cold affusions. Whilst in the bath, violent spasms and very disagreeable sensations are excited; these soon pass away. Active exercise is recommended for half an hour, after each bath. The daily repetition of this process, for a few weeks, usually cures the most obstinate cases.

The Conductors of the Journal of Health will accept our thanks for their politeness in sending us a neatly bound copy of the first volume of that Journal,—a work which needs not our commendation, since it has already received the warm approbation of an almost unparalleled number of subscribers, among whom are the wisest and best men in the country,—a work which contains precepts that, judiciously observed, would crown many a brow with centennial laurels, and reduce the whole Faculty of Medicine to abject beggary.

Whole number of deaths in Boston the week ending November 27th, 18. Males, 9,—Females, 7. Stillborn, 2.

Of consumption, 3—croup, 1—typhous fever, 1—inflammation in the bowels, 1—infantile, 3—scarlet fever, 1—brain fever, 1—fever, 1—intemperance, 1—rheumatic fever, 1.

ADVERTISEMENTS.

WILLIAMS ON DISEASES OF THE LUNGS.

THIS day received, by CARTER & HENDEE, " A Rational Exposition of the Physical Signs of the Diseases of the Lungs and Pleura, illustrating their Pathology and facilitating their Diagnosis." By **Charles J. B. Williams.**
Dec. 6.

MEDICAL SCHOOL OF MAINE.

THE **Medical Lectures at Bowdoin College** will commence on *Monday, the twenty-first day of February,* 1831.

Theory and Practice of Physic, by **John Delamater**, M.D.

Anatomy and Surgery, by **Reuben D. Mussey**, M.D., Professor at Dartmouth College.

Obstetrics, by **James McKeen**, M.D.

Chemistry and Materia Medica, by **Parker Cleaveland**, M.D.

The **Anatomical Cabinet** is extensive, and constantly increasing.

The **Library**, already one of the most valuable Medical Libraries in the United States, is every year enriched by New Works, both foreign and domestic.

Every person, becoming a member of this Institution, is required to present satisfactory evidence that he possesses a good moral character.

The amount of fees for admission to all the Lectures is $50. Graduating fees, including diploma, $10. There is no Matriculating nor Library fee. The Lectures continue three months.

Degrees are conferred at the close of the Lecture term in May, and at the following Commencement of the College in September.

Boarding may be obtained in the Commons' Hall at a very reasonable price.

P. CLEAVELAND, Secretary.
Brunswick, Oct. 16, 1830. 4weop

HALL ON LOSS OF BLOOD.

THIS day received, by CARTER & HENDEE, " Researches, principally relative to the Morbid and Curative Effects of Loss of Blood." By **Marshall Hall**, M.D. F.R.S.E. Dec. 6.

NEURALGIC DISEASES.

A TREATISE on Neuralgic Diseases, dependent upon Irritation of the Spinal Marrow, and Ganglia of the Sympathetic Nerve. By **Thomas Pridgin Teale**, Member of the Royal College of Surgeons in London, &c. Just received by CARTER & HENDEE. Nov. 2.

GERMAN LEECHES.

RICHARD A. NEWELL, Druggist, Summer Street, respectfully informs the Physicians and Public generally, that he has just received a fresh supply of the above-named *Leeches*, which will be sold at a *fair* price.

N. B.—Leeches sent to any part of the city, and applied, without extra charge, by day or by night. 6w—Nov. 8.

SURGICAL INSTRUMENTS AND CHEMICALS.

STUDENTS in want of the above articles, would do well to call, before purchasing, at BREWER & BROTHERS', Nos. 90 and 92 Washington Street—Boston.
Oct. 15. ep3m

ABERCROMBIE ON DISEASES OF THE STOMACH.

JUST received by CARTER & HENDEE—Pathological and Practical Researches on Diseases of the Stomach, the Intestinal Canal, the Liver, and other Viscera of the Abdomen. By **John Abercrombie**, M.D., Fellow of the Royal College of Physicians of Edinburgh, &c., and first Physician to his Majesty in Scotland. Sept. 28.

SURGEON DENTIST'S MANUAL.

JUST received, by CARTER & HENDEE, The Surgeon Dentist's Anatomical and Physiological Manual. By **G. Waite**, Member of the Royal College of Surgeons. Nov. 2.

Published weekly, by John Cotton, at 184, Washington St. corner of Franklin St., to whom all communications must be addressed, *postpaid.*—Price three dollars per annum, if paid in advance, three dollars and a half if not paid within three months, and four dollars if not paid within the year. The postage for this is the same as for other newspapers.